## Case 1:15-cr-00125-PKC Document 103-6 Filed 08/29/22 Page 1 of 4

TRULINCS 49665018 - AQUIRRE-CUERRO, GABRIEL - Unit: EDG-C-A

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FROM: 49665018 TO: Warden

SUBJECT: \*\*\*Request to Staff\*\*\* AQUIRRE-CUERRO, GABRIEL, Reg# 49665018, EDG-C-A

DATE: 03/30/2022 08:15:01 PM

To: Warden Jenson

Inmate Work Assignment: Landscape

Esteemed Warden Jenson, my sincere greetings and wish that the arrival of this humble request finds you in perfect health and

enjoying the best of circumstances.

I, Gabriel Aquirre-Cuerro 49665-018 humbly request that you grant me a compassionate release pursuant to program statement 5050.49, 18 U.S.C. section 3582(c) and modify my term of imprisonment by reducing it to time served. I am a 58 years-old Hispanic suffering from several illnesses (hypertension, high cholesterol, polypous in the colon, and asthma) that put me in high risk of severe illness and even death from COVID-19; and if you wish, I can supply you with a medical record highlighting the medication I've been prescribed by the BOP. Therefore, Sir, my medical condition coupled with the Bureau of Prisons' failure to control the spread of COVID-19 in its prisons places my health and life in grave danger.

Warden Jenson, when I was sentenced the court could not have anticipated the risks posed by the unprecedented global pandemic and I understand that perfectly; however, the pandemic is a fact that we must accept and I have unfortunately become a victim of it and suffered severely when I contracted it. Additionally, Superintendent Jenson, I am a native of Colombia and if you were to, hopefully, grant me this humble request, I will be deported to Colombia and will be able to care for my elderly

wife and children who have also been infected by COVID-19.

I have been in BOP custody for the past seven years and have never received an incident report - which shows proof of my self-imposed rehabilitation - and have but five years remaining in my sentence; reasons why I know your mercy and compassion will be extremely appreciated in granting me this very timid request.

Thank you so, so much for your time, compassion, professionalism, kind response, and may you be flooded with a storm of

blessings.

Sincerely and at your service, Gabriel Aquirre-Cuerro, #49665-018



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## **Bureau of Prisons Health Services Clinical Encounter**

Inmate Name: **AQUIRRE-CUERRO, GABRIEL** 

Date of Birth: 03/18/1963

Encounter Date: 02/24/2020 13:30

Sex: Race: WHITE

Provider: Dalmasi, Odeida MD/CD

49665-018 Reg #:

Facility: PHL Unit **D04** 

Chronic Care - 14 Day Physician Eval encounter performed at Health Services.

SUBJECT:VE:

COMPLAINT 1

Provider: Dalmasi, Odeida MD/CD

**Chief Complaint: HYPERTENSION** 

Inmate in transit to another facility. Currently he denies chest pain, sob, headache, palpitations. He says that he took his blood pressure medication this morning. He was told that his blood pressure is high and HCTZ 25 mg was given to him stat. I reviewed his record and his blood pressure sometimes is normal and sometimes is above normal limit. He was told that HC will be added today and he will be re-evaluated at this final destination because

he is leaving soon and he understood.

Pain:

Seen for clinic(s): Endocrine/Lipid, General

**OBJECTIVE:** 

Pulse:

**Date Time** 

**Rate Per Minute** 

Location

Rhythm

**Provider** 

02/24/2020 13:34 PHL

74

Dalmasi, Odelda MD/CD

Respirations:

Date

Time

Rate Per Minute Provider

02/24/2020

13:34 PHL

14 Dalmasi, Odeida MD/CD

**Blood Pressure:** 

Date

13:34 PHL

13:34 PHL

**Value** 

Location

**Cuff Size** 

**Provider** 

**Time** 02/24/2020 13:34 PHL

160/95

**Position** 

Dalmasi, Odeida MD/CD

SaO2:

**Date** 02/24/2020 Time

Value(%) Air

100

**Provider** 

Dalmasi, Odeida MD/CD

Weight:

Date 02/24/2020 **Time** 

Lbs 175.0 Kg Waist Circum, Provider

79.4

Dalmasi, Odelda MD/CD

Exam:

Neck

Musculoskeletal

Yes: Full ROM

Vascular

No: Jugular Venous Distension, Carotid Bruits

**Pulmonary** 

**Auscultation** 

Yes: Clear to Auscultation

No: Crackles, Rhonchi, Wheezing

Cardiovascular

Inmate Name: AQUIRRE-CUERRO, GABRIEL

Date of Birth: 03/18/1963

Encounter Date: 02/24/2020 13:30

Sex: Race: WHITE Provider: Dalmasi, Odeida MD/CD Reg #: 49665-018

Facility: PHL Unit **D04** 

Exam:

**Auscultation** 

Yes: Regular Rate and Rhythm (RRR), Normal S1 and S2

Peripheral Vascular

General

No: Varicosities

Musculoskeletal

Gait

Yes: Normal Gait

Ankle/Foot/Toes

Yes: Normal Exam, Full Range of Motion

No: Pitting Edema, Swelling

ASSESSMENT:

Essential (primary) hypertension, I10 - Current

Neuralgia and neuritis, unspecified, M792 - Current

PLAN:

**New Medication Orders:** 

Rx#

Medication

**Order Date** 

hydroCHLOROthiazide Tablet/Capsule

02/24/2020 13:30

Prescriber Order: 25 mg Orally - daily x 180 day(s)

Indication: Essential (primary) hypertension

**Renew Medication Orders:** 

Rx#

Medication

**Order Date** 

193347-PHL DULoxetine HCl Delayed Rel 20 MG Cap

02/24/2020 13:30

Take one capsule (20 MG) by mouth each evening for pain \*\*\*pill line\*\*\* x 180 day(s) Pill Line Prescriber Order:

Only

Indication: Hip and thigh, sprain and strain

193346-PHL Lisinopril 20 MG Tab

02/24/2020 13:30

Prescriber Order: Take one tablet (20 MG) by mouth each day x 180 day(s)

Indication: Essential (primary) hypertension

Schedule:

**Activity** 

Date Scheduled Scheduled Provider

Follow-up 02/25/2020 00:00 MLP 02

BP check.

**Chronic Care Visit** 

08/10/2020 00:00 Physician 01

htn

Disposition:

Follow-up at Sick Call as Needed

Other:

Lab work done recently.

**Patient Education Topics:** 

**Date Initiated Format** 

Handout/Topic

**Provider** 

Outcome

Generated 02/24/2020 13:40 by Dalmasi, Odeida MD/CD

Bureau of Prisons - PHL

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